

INTERNATIONAL APPLICATION
UNDER THE
PATENT COOPERATION TREATY
REQUEST

THE UNDERSIGNED REQUESTS THAT THE PRESENT
INTERNATIONAL APPLICATION BE PROCESSED
ACCORDING TO THE PATENT COOPERATION TREATY

(The following is to be filled in by the receiving Office)

INTERNATIONAL APPLICATION No.: PCT/G 92/01282

INTERNATIONAL FILING DATE: 14 July 1992

(Stamp) United Kingdom Patent Office
PCT International Application

Applicant's or agent's file reference
(indicated by applicant if desired) PA1260

Box No. I TITLE OF INVENTION

PRODUCTION OF ANTIBODIES

Box No. II APPLICANT (WHETHER OR NOT ALSO INVENTOR); DESIGNATED STATES FOR WHICH HE/SHE/IT IS APPLICANT. Use this box for indicating the applicant or, if there are several applicants, one of them. If more than one person (includes, where applicable, a legal entity) is involved, continue in Box No. III.

The person identified in this box is (mark one check-box only):

☐ applicant and inventor* ☒ applicant only

Name and address:**

THE WELLCOME FOUNDATION LIMITED
UNICORN HOUSE, 160 EUSTON ROAD
LONDON NW1 2BP, UNITED KINGDOM

Telephone number (including area code):

081 658 2211

Telegraphic address:

WELLAB BECKENHAM

Teleprinter address:

23937, WELLAB G

State of nationality: United Kingdom

State of residence:* United Kingdom

The person identified in this box is *applicant* for the purposes of (mark one check-box only):

☐ all designated States ☒ all designated States except the United States of America ☐ the United States of America only ☐ the States indicated in the "Supplemental Box"

Box No. III FURTHER APPLICANTS, IF ANY; (FURTHER) INVENTORS, IF ANY; DESIGNATED STATES FOR WHICH THEY ARE APPLICANTS (IF APPLICABLE). A separate sub-box has to be filled in in respect of each person (includes, where applicable, a legal entity). If the following two sub-boxes are insufficient, continue in the "Supplemental Box," (giving there for each additional person the same indications as those requested in the following two sub-boxes) or by using a "continuation sheet."

The person identified in this sub-box is (mark one check-box only): ☒ applicant and inventor* ☐ applicant only ☐ inventor only

Name and address:**

CROWE, JAMES SCOTT of Langley Court, Beckenham, Kent BR3 3BS,
United Kingdom

If the person identified in this sub-box is *applicant* (or *applicant and inventor*), indicate also:

State of nationality: UNITED KINGDOM

State of residence:* UNITED KINGDOM

and whether that person is *applicant* for the purposes of (mark one check-box only):

☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the "Supplemental Box"

The person identified in this sub-box is (mark one check-box only):

☒ applicant and inventor* ☐ applicant only ☐ inventor only

Name and address:**

LEWIS, ALAN PETER of Langley Court, Beckenham, Kent BR3 3BS,
United Kingdom

If the person identified in this sub-box is *applicant* (or *applicant and inventor*), indicate also:

State of nationality: UNITED KINGDOM

State of residence:* UNITED KINGDOM

and whether that person is *applicant* for the purposes of (mark one check-box only):

☐ all designated States ☐ all designated States except the United States of America ☒ the United States of America only ☐ the States indicated in the "Supplemental Box"

* If the person indicated as "applicant and inventor" or as "inventor only" is not an *inventor* for the purposes of all the designated States, give the necessary indications in the "Supplemental Box."

** Indicate the name of a natural person by giving his/her family name first followed by the given name(s). Indicate the name of a legal entity by its full official designation. In the address, include both the postal code (if any) and the State (name).

*** If residence is not indicated, it will be assumed that the State of residence is the same as the State indicated in the address.

PCT/GB 92/01282

04 August 1992

SUBSTITUTE SHEET

Box No. IV AGENT (IF ANY) OR COMMON REPRESENTATIVE (IF ANY); ADDRESS FOR NOTIFICATIONS (IN CERTAIN CASES). A common representative may be appointed only if there are several applicants and if no agent is or has been appointed; the common representative must be one of the applicants.

The following person (includes, where applicable, a legal entity) is hereby/has been appointed as agent or common representative to act on behalf of the applicant(s) before the competent International Authorities:

Name and address, including postal code and country:

If the space below is used instead for an address for notifications, mark here: ☐

N. J. Baker-Munton

The Wellcome Foundation Limited
Langley Court
Beckenham
Kent BR3 3BS
United Kingdom

Telephone number (including area code):

Telegraphic address:

Teleprinter address:

081 658 2211

WELLAB BECKENHAM

23937 WELLAB G

Box No. V DESIGNATION OF GROUPS OF STATES OR STATES⁽¹⁾; CHOICE OF CERTAIN KINDS OF PROTECTION OR TREATMENT. The following designations are hereby made (please mark the applicable check-boxes):

Regional Patent

☐ **EP European Patent⁽²⁾:** AT Austria, BE Belgium, CH and LI Switzerland and Liechtenstein, DE Germany, DK Denmark, ES Spain, FR France, GB United Kingdom, GR Greece, IT Italy, LU Luxembourg, NL Netherlands, SE Sweden, and any other State which is a Contracting State of the European Patent Convention and of the PCT

☐ **OA OAPI Patent:** Benin, Burkina Faso, Cameroon, Central African Republic, Chad, Congo, Gabon, Mali, Mauritania, Senegal, Togo, and any other State which is a Contracting State of OAPI and of the PCT; if other OAPI title desired, specify on dotted line⁽³⁾:

National Patent (if other kind of protection or treatment desired, specify on dotted line⁽³⁾)

- | | |
|--|--|
| <input type="checkbox"/> AT Austria ⁽³⁾ | <input checked="" type="checkbox"/> KR Republic of Korea ⁽³⁾ |
| <input checked="" type="checkbox"/> AU Australia ⁽³⁾ | <input type="checkbox"/> LK Sri Lanka |
| <input type="checkbox"/> BB Barbados | <input type="checkbox"/> LU Luxembourg ⁽³⁾ |
| <input type="checkbox"/> BG Bulgaria ⁽³⁾ | <input type="checkbox"/> MC Monaco ⁽³⁾ |
| <input type="checkbox"/> BR Brazil ⁽³⁾ | <input type="checkbox"/> MG Madagascar |
| <input checked="" type="checkbox"/> CA Canada | <input type="checkbox"/> MW Malawi ⁽³⁾ |
| <input type="checkbox"/> CH and LI Switzerland and Liechtenstein | <input type="checkbox"/> NL Netherlands |
| <input type="checkbox"/> DE Germany ⁽³⁾ | <input type="checkbox"/> NO Norway |
| <input type="checkbox"/> DK Denmark | <input type="checkbox"/> PL Poland ⁽³⁾ |
| <input type="checkbox"/> ES Spain ⁽³⁾ | <input type="checkbox"/> RO Romania |
| <input checked="" type="checkbox"/> FI Finland | <input type="checkbox"/> SD Sudan |
| <input type="checkbox"/> GB United Kingdom | <input type="checkbox"/> SE Sweden |
| <input checked="" type="checkbox"/> HU Hungary | <input type="checkbox"/> SU Soviet Union ⁽³⁾ |
| <input checked="" type="checkbox"/> JP Japan ⁽³⁾ | <input checked="" type="checkbox"/> US United States of America ⁽³⁾ |
| <input type="checkbox"/> KP Democratic People's Republic of Korea ⁽³⁾ | |

Space reserved for designating States (for the purposes of a national patent) which have become party to the PCT after the issuance of this sheet:

(1) The applicant's choice of the order of designations may be indicated by marking the check-boxes with sequential arabic numerals (see also the "Notes to Box No. V").
(2) The selection of particular States for a European patent can be made upon entering the national (regional) phase before the European Patent Office (see also the "Notes to Box No. V").
(3) If another kind of protection or a title of addition or, in the United States of America, treatment as a continuation or a continuation-in-part is desired, specify according to the instructions given in the "Notes to Box No. V."

Box No. VI PRIORITY CLAIM (IF ANY). The priority of the following earlier application(s) is hereby claimed:

Country (country in which it was filed if national application; one of the countries for which it was filed if regional or international application)	Filing Date (day, month, year)	Application No.	Office of filing (fill in only if the earlier application is an international application or a regional application)
(1) United Kingdom	(15-07-91) 15 July 1991	91 152 84.3	
(2) United Kingdom	(01-08-91) 01 August 1991	91 165 94.4	
(3) United Kingdom	(23-03-92) 23 March 1992	92 062 84.3	

(Letter codes may be used to indicate country and/or Office of filing)

When the earlier application was filed with the Office which, for the purposes of the present international application, is the receiving Office, the applicant may, *against payment of the required fee*, ask the following:

☐ the receiving Office is hereby requested to prepare and transmit to the International Bureau a certified copy of the above-mentioned earlier application/of the earlier applications identified above by the numbers (insert the applicable numbers)

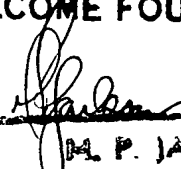
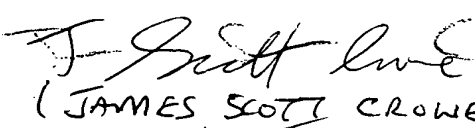

Box No. VII EARLIER SEARCH (IF ANY). Fill in where a search (international, international-type or other) by the International Searching Authority has already been requested (or completed) and the said Authority is now requested to base the international search, to the extent possible, on the results of the said earlier search. Identify such search or request either by reference to the relevant application (or the translation thereof) or by reference to the search request.

International application number or number and country (or regional Office) of other application:

International/regional/national filing date:

Date of request for search:

Number (if available) given to search request:

Box No. VIII SIGNATURE OF APPLICANT(S) OR AGENT
THE WELLCOME FOUNDATION LIMITED

M. P. JACKSON
HEAD

(JAMES SCOTT CROWE.)

(ALAN PETER LEWIS)

If the present Request form is signed on behalf of any applicant by an agent, a separate power of attorney appointing the agent and signed by the applicant is required. If in such case it is desired to make use of a general power of attorney (deposited with the receiving Office), a copy thereof must be attached to this form.

Box No. IX CHECK LIST (To be filled in by the Applicant)

This international application contains the following number of sheets:

1. request	3	sheets
2. description	49	sheets
3. claims	5	sheets
4. abstract	1	sheets
5. drawings	11	sheets
Total	69	sheets

Figure number of the drawings (if any) is suggested to accompany the abstract for publication.

This international application as filed is accompanied by the items marked below:

- ☐ separate signed power of attorney
- ☐ copy of general power of attorney
- ☒ priority document(s) (see Box No. VI)
- ☐ receipt of the fees paid or revenue stamps
- ☒ cheque for the payment of fees
- ☐ request to charge deposit account
- ☐ other document (specify)

(The following is to be filled in by the receiving Office)

- Date of actual receipt of the purported international application:
- Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:
- Date of timely receipt of the required corrections under Article 11 of the PCT:
- Drawings ☒ Received ☐ No Drawings

(The following is to be filled in by the International Bureau)

Date of receipt of the record copy:

27 JULY 1992

(27.07.92)

(14-07-92)
14 July 1992